PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/532421

| CLAIMS AS FILED - PART I | | | | | | SMALL ENTITY | | OTHER THAN | | |
|---|--|---|--|---|------------------------------|---------------------|--|------------|---------------------|------------------------|
| (Column 1) (Column 2) | | | | | | TYPE | | | OR SMALL ENTITY | |
| U.S. NATIONAL STAGE FEES | | | | | _ | RATE | FEE | | RATE | FEE |
| BASIC FEE | | | SMALL ENT. = \$ 150 | | GE ENT. = \$ 300 | BASIC FEE | | OR | BASIC FEE | 300 |
| EXAMINATION FEE | | | Satisfies PCT Article 33(1)- (4) = \$ 50 / \$ 100 | | ther situations = 100/\$ 200 | EXAM. FEE | | | EXAM FEE | 200 |
| SEARCH FEE | | | | S. is ISA = \$50 / \$ 100 ALL other countries = \$ 200 / \$ 400 | | SEARCH FEE | | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | | | minus 10 | 00 = | / 50 = | X \$ 125 = | | | X \$ 250 = | |
| TOTAL CHARGEABLE CLAIMS | | | // minus | 20 = | _ | X \$ 25 = | | OR | X \$ 50 = | |
| INDEPENDENT CLAIMS | | | minus | 3=. | | X \$ 100 = | | OR | X \$ 200 = | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | TOTAL | | OR | TOTAL | 900 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | SMALL | OTHER THA SMALL ENTITY OR SMALL ENTIT | | | |
| AMENDMENT A | Pre | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • 11 | Minus ** | 20 | = | X \$ 25 = | 1 | OR | X \$ 50 = | 7 |
| | Independent | • 1 | Minus *** | 3 | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | + \$ 180 = | | OR | +\$360= | |
| TOTAL ADDIT. / OR TOTAL ADDIT. | | | | | | | | | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | |
| ПВ | | CLAIMS REMAINING AFTER AMENDMENT | P | HIGHEST NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| DMENT | Total | • | Minus ** | | = | X \$ 25 = | | OR | X \$ 50 = | |
| Z | Independent | • | Minus *** | | 8 | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRES | ENTATION OF M | IULTIPLE DEPENDI | ENT CLAIM | | + \$ 180 = | | OR | + \$ 360 = | |
| ` | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". If the "Highest Number Previously Paid For" (IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | |